

If an operation has been recently performed, it will be possible in some instances to reopen the abdomen and see a few loops without any anesthetic. In many of these the obstructed loop will present in the wound. Where this is not possible, spinal anesthesia would seem to be the anesthetic of choice because of the ease of exploration which it gives. In case of a spastic ring due to the plexus being out of commission, we should, theoretically, expect no effect on the ring from spinal anesthesia. In case of a spasm due to distant reflex causes, spinal anesthesia might be expected to give relaxation.

#### CONCLUSION

Spastic contractions occur in the small intestine, both from reflex and direct causes, and are to be considered in case of acute obstruction. The effect of anesthetics and preoperative medication on the possibility of their detection is discussed.

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#### DISCUSSION

JOHN HOMER WOOLSEY, M. D. (490 Post Street, San Francisco).—The occurrence of a spastic contraction ring, as observed by Doctor Hoyt, is of tremendous interest. It is a known fact that one may have spastic contractions of the sphincteric regions and also in the stomach from some local or referred irritation. That it has been seen to occur in the jejunum is, therefore, of additional interest. The cause of such a contraction band is not clear. The most plausible explanation today is that it is due primarily to an unusual stimulation or a lowered threshold of stimulation of the vagus. The short reflex through the intrinsic nerve plexi of Meissner and Auerbach alone may be the cause. One observes also a similar contraction band at times when the blood supply to an intestinal loop is temporarily injured—again being a reflex of the intrinsic nerve plexi. In any event, as demonstrated by Doctor Hoyt in instances of non-progression of the normal gastro-intestinal content, inhibitors of smooth muscle contraction, such as belladonna, atropin, or luminal, should be employed before resorting to further surgery.

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FREDERICK H. RODENBAUGH, M. D. (490 Post Street, San Francisco).—Spasms of the small intestine, as observed and described by Doctor Hoyt, are of theoretical and clinical interest to the roentgenologist as an explanation of some of the acute abdominal symptoms.

The roentgenologist observes spasms of varying intensities in other portions of the gastro-intestinal tract and has observed the type of spasm described by Doctor Hoyt in the stomach, esophagus, and colon; but spasms of the small intestine because of the acute onset have not been observed in routine studies.

Doctor Hoyt's observation is most interesting, and it is not improbable that spastic contractions of less intensity and duration than those which produce the acute obstructive symptoms might be the cause of some of our subacute abdominal symptoms of unknown etiology.

Doctor Hoyt's report has been most instructive and should stimulate interest in this condition which, theoretically at least, should not be infrequent and may be the cause of some of the unrecognized acute postoperative abdominal symptoms.

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WALTER C. ALVAREZ, M. D. (Mayo Clinic, Rochester, Minnesota).—This is an interesting case and well worth reporting. I have many reasons for suspecting that if the bowel had been opened in this person a patch of jejunitis or an actual ulcer would have been found in the neighborhood of the ring. In some persons the making of a gastro-enterostomy, with the pouring of acid gastric contents directly into the jejunum, causes considerable irritation of this part of the bowel. In a number of cases of gastrojejunal ulcer the history suggests strongly that the lesion formed before the patient left the hospital.

I know of a few cases in which a contracted ring similar in appearance to the one reported by Doctor Hoyt had to be excised before the patient could recover.

## THE LURE OF MEDICAL HISTORY

CALIFORNIA'S FIRST MEDICAL HISTORIAN,  
VICTOR JEAN FOURGEAUD, A.B., M.D.\*

#### PART I

By J. MARION READ, M. D.  
San Francisco

THE circumstances which sent a cultured gentleman and distinguished physician across the plains to California before the gold-rush days of '49 might make a tale. And in the case of Doctor Fourgeaud they do. That this pioneer doctor was also a profound student of medical history renders the story of his life peculiarly appropriate for this occasion, inasmuch as the Stanford chapter of Alpha Omega Alpha has dedicated itself to the study of California medical history.

Victor J. Fourgeaud was born in Charleston, South Carolina, obviously of French lineage. The events of his early life are known to us chiefly by inference. Even the date of his birth is disputed. The historian, Eldredge,<sup>1</sup> records it as April 8, 1817. William Heath Davis<sup>2</sup> asserts that it was February 1, 1816, which seems correct, as it tallies with the fifty-nine years graven on his tombstone as his age at death in 1875.

When about ten years old he was taken to France, where he received much of his preliminary education. He returned to his birthplace,

\*Second annual address delivered before Stanford Chapter of Alpha Omega Alpha, May 17, 1930.

however, to study medicine, since it is recorded that the Medical College of South Carolina conferred upon him the M. D. degree in 1837, when he was twenty-one. Immediately thereafter the young medico departed for Paris, where he spent three years in further study. Eldredge says Fourgeaud was a graduate of the University of France, but it seems probable that his A. B. degree was attained at the French institution prior to taking up the study of medicine in this country.

His familiarity with the views of leading French physicians of his time, as shown in his original writings and notes upon translations, indicates that the three years in Paris were years of sincere postgraduate study.

A further reason for believing that his Paris days were spent in the clinic, hospital, and medical library, rather than in those pleasure palaces which visiting Americans in their early twenties are apt to frequent, is that during this period he began an extensive research into medical history. How or why this very young doctor took such a keen interest in the story of medicine, we do not know.

We do know, however, that the interest was deep and genuine, for the studies begun in Paris as a youth were continued under the vicissitudes of practice in various places, and culminated after a quarter of a century in a work which he probably regarded as his magnum opus.

But Doctor Fourgeaud's fame rests not alone on his recording of what others accomplished. By virtue of his thorough knowledge of medicine and by displaying the courage of his convictions he inscribed his own name in the medical history of America.

Our hero, like many of us, presented a strange combination of mental traits. His chief interest, mayhap his hobby, was the history of his profession and in this respect he looked backward upon Time, yet, Janus-like, he also looked ahead—far beyond present attainments toward the future. This we are led to conjecture from the conduct of his life.

For example, when the time came to practice his art he did not remain in France but returned to the United States. Nor did he tarry in his native state or anywhere on the Atlantic seaboard but turned westward and took up his abode in St. Louis.

St. Louis, then with about fifteen thousand inhabitants, was the frontier city of the country. Its location on the western edge of civilization and a large French-speaking population were probably the influences which led Fourgeaud to locate there for the practice of his profession.

How the young doctor of twenty-four obtained a foothold in this frontier city we can readily imagine. He seems to have possessed a pleasing personality, better than the average medical education, and the ability to speak French as fluently as English.

We know that he achieved a considerable degree of success in the practice of medicine dur-

ing his seven years' residence in St. Louis, and that his fellow practitioners there came to respect him, as others did later in California.

Somewhen during this period he took unto himself a wife and to the couple, while still living in St. Louis, was born a son.

When Doctor Fourgeaud had been practicing about three years the first issue of the *St. Louis Medical and Surgical Journal* made its appearance, bearing the date of April 15, 1843, and under the editorship of M. L. Linton, professor of medicine in the St. Louis University. The second article<sup>3</sup> in this initial issue was a translation by Fourgeaud from the French of an essay upon "Auscultation During Pregnancy." In a footnote the translator gives a critical review of the opinions then held concerning how the two heart sounds are produced. This point in cardiac physiology continued to excite Fourgeaud's curiosity for some years, as we shall see later.

The natural desire of every Boswell to paint his Johnson in the most heroic stature has led one of Fourgeaud's biographers to credit him with founding and editing the *St. Louis Medical Journal*. This half-truth has been propagated by others,<sup>4</sup> myself included,<sup>5</sup> and so in justice to the whole truth I record that Doctor Fourgeaud was a co-editor with Doctors Linton and McPheeters for twenty months prior to his departure from St. Louis.

With a medical education, exceptional for the times, combined with a flair for writing, it was to be expected that his literary ability would make itself known in time. In the issue of August 1845 appears the announcement, "Our readers will perceive that Dr. V. J. Fourgeaud, our esteemed correspondent and efficient collaborator, is associated with us as co-editor."<sup>6</sup> On the title page the new editor is described as one of the physicians of the St. Louis Hospital, etc.

Undoubtedly Doctor Fourgeaud had made rapid progress in his climb up the ladder of success. And the reason is not difficult to find, if we may judge his professional ability by the quality of his writings.

Two of his undertakings are particularly worthy of mention. In March 1844 he published the first article of a series based upon annual analysis of the mortality statistics of St. Louis. The title was "Mortality Among Children in St. Louis,"<sup>7</sup> and his chief concern was the heavy death rate among small children from cholera infantum. It was a most ambitious undertaking, as well as a worthy and necessary one, for, as the author says, his city had hitherto neglected publication of its mortality figures, thus lagging behind other cities.

An excerpt from the introduction follows:

"Our mind was directed to this subject by the alarming mortality which prevailed among the children of this place during the past summer, especially during the months of July and August. It is indispensable for us to obtain accurate information respecting this mortality. We must learn the number of victims, and the maladies of which they died. The causes,

also, shall be inquired into; for every conscientious and philanthropic physician feels himself bound, not only to relieve the sufferings of his fellow citizens, but also to discover their causes and remove them if it be in his power."

His expressed viewpoint reveals an advanced conception of the epidemiological nature of the problem and also of the proper manner in which it should be attacked.

Reviewers for the *American Journal of the Medical Sciences* took cognizance of these articles and published complete abstracts of them upon two occasions. One comments: "In demonstrating the extent of a great source of suffering and mortality among his fellow citizens, Doctor Fourgeaud has displayed both intelligence and zeal in the cause of humanity."<sup>8</sup>

One is impressed at almost every turn by the soundness of Doctor Fourgeaud's views. To a mind of more than average native ability had been added a most excellent medical training in an atmosphere of refinement and culture. It is quite likely that Victor Fourgeaud was the best prepared and most cultured physician practicing in that frontier city during the 1840's, a period prior to medical licensure and when the layman made no distinction between graduate physicians and those who undertook the practice of medicine after a two years' apprenticeship to a physician preceptor.

The mark of true culture is discernible in Doctor Fourgeaud's broadmindedness and liberality of viewpoint. But this was to be expected of one who had delved as deeply as he into the history of his profession. Just what experiences or trend of thought prompted him we do not know, but during his St. Louis sojourn he drew upon his historical notes for a series of papers under the title of "Eclecticism in Medicine."<sup>9</sup>

He wrote, "Each day witnesses the birth and death of systems, and a cursory glance into the history of medicine will suffice to convince us of their absolute insufficiency."

He proclaims general acceptance of the experimental method of Bacon as applied to the investigation of the nature and treatment of disease and makes a plea for empiricism.

"Was it reason that discovered the efficacy of peruvian bark in intermittent fevers; of mercury in syphilis; of iodine in goiter, etc., etc.? . . . Our inability to explain the *modus operandi* of medicaments is no sufficient reason for their rejection when their efficacy is incontestable. . . . We are at a loss in numberless cases for correct pathological or physiological notions. What do we know of intermittent fevers? Has the secret of their periodicity as yet been explained?"

It is the mark of an intelligent and educated physician to know the limits of knowledge pertaining to his profession. The therapeutic triumph of quinin over malaria did not mislead Doctor Fourgeaud into satisfied belief that his profession required to know nothing more about the disease.

On December 23, 1845, this rising French physician, then twenty-nine years old, delivered "An Introductory Lecture on the History of Medi-

cine" before the Medico-Chirurgical Society of St. Louis. He concluded:

" . . . I have given you a rapid and imperfect sketch of the past history of the science to which you have devoted yourselves.

"Its future greatness, who can predict? What a splendid vista opens before us.

"You, gentlemen, are in part the depositories of its testing. Be faithful to your trust. Press onward, with an eye fixed unblenchingly on truth, like the eagles on the sun. Steer clear of the shoals and quicksands on which so many have been wrecked. Trust not yourselves to imagination in a science involving such high and holy responsibilities as the health, happiness, and life of our fellow men. Devote yourselves with untiring vigilance to the observation of facts. Be not dismayed by difficulties, but like true sons of the gallant west, rouse all your energies into action and overcome them."<sup>10</sup>

As we look back over his life and peruse his writings can we doubt the high ideals and honest intent of this man, or his ability and desire to render competent and conscientious service to his patients? Yet they were doubted. Nay, more, he was hailed before a tribunal in a malpractice suit.

There is something about such suits which sets them apart from all other civil suits. Behind each suit usually sits the grinning god of Malice or his grasping brother Avarice. Even when the defendant wins he has lost that which every physician prizes above all—an unsullied reputation for integrity and ability.

It is inconceivable that a malpractice suit would ever be brought in a community made up entirely of cultured persons such as was Victor Fourgeaud, for example. But St. Louis in 1846 was not such a community, nor is it likely that such ever existed or exists today.

One can easily imagine how this suit shook the equanimity of this refined and highly lettered young physician. To a man who had dedicated himself to the best in medicine, who had labored long over the mortality figures to ascertain why so many infants died in St. Louis, who had pleaded in print for the erection of a children's hospital—to such a man a malpractice suit was a calamity, a blasting of his fondest hopes and aspirations.

Now there are those thick-skinned sons of Mammon who occasionally enter medicine with the mistaken idea that it is a highly remunerative calling. To them a malpractice suit is all in the day's work and perhaps something to be capitalized.

But Victor Fourgeaud was not of this stripe. His gentility, however, did not require him to take this blow without retaliation, and his retort was made in a characteristic manner.

"Medical Responsibility—The Public and the Physician"<sup>11</sup> was the title of his published thoughts upon malpractice suits.

"Nothing is more calculated to impede the progress of our science than the custom, now becoming so prevalent of suing for alleged malpractice. It is of no unrequent occurrence in our day and country to see an honorable and skillful physician dragged before the public, summoned before a court of justice—and for what? To answer for some supposed or

actual error of judgement to which as fallible man he was liable; and before what tribunal is his cause to be adjudicated? judge, learned in the law, perhaps; jurors, high-minded and conscientious men, we don't doubt, and qualified to decide all other cases that may be laid before them, but wholly ignorant of everything appertaining to our science. Can such men be deemed competent judges in questions entirely medical in their character? Undoubtedly not."

In his article Doctor Fourgeaud pointed out the long preparation demanded in France of those who would practice medicine, the rigid tests to be passed before certification, and also the guarantees and protection given the medical profession in a highly civilized country.

Disillusioned, disappointed, and deeply perturbed by the malpractice suit, our enthusiastic young physician decided to leave St. Louis. In fact we might expect that he would return to France, to an environment in which, by breeding and education, he was at home.

But we have yet more to learn about Victor Fourgeaud. Though his culture was more than a veneer and the hold of organized society upon him was a strong one, yet it could not turn his steps eastward.

The primitive man in him; the call of adventure; the desire to pioneer, to see new worlds—these turned him westward. The newest part of the new world rather than the effete old world beckoned to him. It fascinated him now just as St. Louis had appealed to him seven years before.

What had he accomplished in those seven years in the frontier city which had more than doubled its fifteen thousand inhabitants in the period? He had climbed to the top in his profession and had evidently attained financial success sufficient to invite a malpractice suit.

But a man's peers and contemporaries know best his true worth, so I quote Doctor Linton<sup>12</sup> in an editorial note entitled simply:

"Dr. Fourgeaud

The connection of our esteemed co-editor with the *St. Louis Medical and Surgical Journal* has ceased. We doubt not that our readers will regret this. Why Doctor Fourgeaud should leave St. Louis for the shores of the far-off Pacific we acknowledge that we can see no good reason; that is, we can see no good reason why a physician in a good lucrative practice—surrounded by numerous friends—in the enjoyment of all that wealth can afford in a large, rapidly advancing and flourishing city, blest with all the faculties and endowments physical, moral, and intellectual for acting a glorious part on such a theatre should voluntarily turn aside from all those things to take up his abode in California. To the burning spirit of adventure, which is nowhere so powerfully in operation as in this country—that spirit which beckons with wizzard charms to unexplored valleys, undescribed climes, and untrodden coasts, to the mysterious yet potent operations of this spirit only, can we attribute the apparent heroism of such conduct. If our influence could have counteracted such an influence, the profession of St. Louis would not have lost one of its most brilliant ornaments; as it is, all that we can do is to utter a heartfelt wish that our noble-hearted and enthusiastic friend, as he follows westward the bright star of empire, may realize all the enchanting visions of his imaginings—find an eutopia equal to his fondest hopes.—L."

And so one day in April, with his wife, little son, and his brother, he turned his back on St. Louis and headed out across the prairie. It is recorded<sup>4</sup> that at the first sunset they camped under some oaks twenty miles out from the city. But for the remainder of the six months' trek to California we can follow them only in fancy.

Here was fortitude. The trail of '49 to California was not yet blazed. What could such a small party do if attacked by Indians? What did this Paris-raised gentleman and his brother know about firearms, buffalo, prairie fires, packing, camping, and woodsmanship in general?

Perhaps the news of the tragic fate which befell the Donner Party the winter before had not yet filtered back to St. Louis. Would it have made any difference to the doctor? I doubt it.

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## MASTERS IN MEDICINE

### A TRIBUTE TO THE LATE ERNST FUCHS

Among outstanding figures in medicine few have loomed larger through their work than Professor Ernst Fuchs of Vienna, whose monumental studies in ophthalmology for many years made him the recognized dean of that specialty. His death took place in Vienna on November 21, 1930.

The *Wiener Klinische Wochenschrift* of December 4, 1930, printed a tribute from Professor Josef Meller of the I. Eye Clinic, University of Vienna, himself a celebrated assistant and associate of Fuchs in former days, and well known to a host of leading American ophthalmologists whom he has taught. Excerpts from the tribute by Meller are worthy of perusal, not only because of the deserved praise given to one of the world's great masters in medicine, but also because of the emphasis placed upon the true character of scientific labor. On that account some portions of his tribute to his former chief are here printed.—(Translations by the courtesy of S. L. Millard Rosenberg, Ph. D.):